

Check Request

This request is to be used any time Troop/SU funds are spent. Whenever possible, this should be in the form of a reimbursement, not an advance. **Receipts must be submitted for all expenses and submitted within 30 days.**

Requested by: _____ Date: _____

Check to be made out to: _____

Amount of check: \$ _____

___ Reimbursement (receipt must be attached)

___ Advance, receipts to follow by: _____ Receipts received on: _____

* Advance require approval from SU Manager / troop leader

Explanation of expense(s):

Please classify expense(s) into the appropriate categories indicated below:

Office supplies	\$ _____	Refreshments	\$ _____
Postage	\$ _____	Events	\$ _____
Printing (copies)	\$ _____	Crafts	\$ _____
Recognitions	\$ _____	Other	\$ _____

Specify other: _____ \$ _____
_____ \$ _____
_____ \$ _____

Approved: _____ Date: _____
Leader/Co-leader/SUM/Event Director

JM: AT
AD-0356W 4/20/2017

TREASURER USE ONLY

Date received: _____
Date paid: _____
Check #: _____
Paid by: _____
Receipts attached? _____